UNITED STATES BANKRI EASTERN DISTRICT OF N			
In re:	X	Case No.	318-76800-05
Genny mari	Debtor(s)	Chapter	U.S. BANGE EASTER
AFI	FIDAVIT PURSUANT TO I	LOCAL RULE 1007-1(b)	CLERK CARPTCY ARREVORK T 26 F
Frenny Mai	undersig	ned debtor herein, swears as follo	ws G
 Debtor filed a petition ur Schedule(s) AT, FOLD 	nder chapter 7 of the Bankrup MOT, 108, MERWS TEST were not filed at the time of filing.	tcy Code on [DOO] 13 1065, 166 Dec. ng of the said petition, and is/are b	eing filed herewith.
3. [Check applicable box]:			
☐ The schedules filed laccompanied the pet		orrections to, or deletions from, lis	st of creditors which
creditors which acco	mpanied the petition. Also listed	f scheduled creditors added to or d , as applicable, are any scheduled orrected. The nature of the change	creditors whose
[If creditors have been as format prescribed by E.D.		x is annexed hereto, listed added	creditors ONLY, in the
Reminder: No amendment of 1(b) has been filed with the		of of service in accordance with I	E.D.N.Y LBR 1009-
amendment is filed prior to the deemed to constitute a motion object to the discharge of the a hearing if no objection is file.	he expiration of the time period s in for a 30-day extension of the ti debtor and/or to determine dischalled with the Court and served on	petition will be deemed an amendate to forth in Fed. R. Bankr. P. 4004 me within any added creditors manargeability. The motion will be deductor within 14 days following to chedules in accordance with E.D.1	and 4007, it will be y file a complaint to eemed granted without filing of proof of
X Dated: 10/26/18		Debtor (signature)	
Sworn to before me this	_		
Day of, 20)		
Notary Public, State of New	York		

Fill in this information to identify your case:					
Debtor 1	Frenny First Name	Middle Name	Mariano Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District of New York					
Case number	8-18-76800-ast (If known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pari 1: Summarize Your Assets	
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Your assets Value of what you own \$ 400,000.00
1b. Copy line 62, Total personal property, from Schedule A/B 1c. Copy line 63, Total of all property on Schedule A/B	
Part 2: Summarize Your Liabilities	\$
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	* 477.58 + \$ 36,758.13
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,541.68
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	s <u>5,604.31</u>

Check If this is an amended filing

Debtor 1

Del	ebtor 1 Frenny	Mariano	Case number (if known) 8-18-768	00-ast
	First Name Middle Name Last Name	1		
				'
Pa	art 4: Answer These Questions for Administration	rative and Statistical	Records	
6.	Are you filing for bankruptcy under Chapters 7, 11,	or 13?		1
	☐ No. You have nothing to report on this part of the fo	orm. Check this how and su	shmit this form to the court with your of	her schedules
	Yes	ini. Oneckinis box and su	ionia ans form to the court with your on	iei solieguies.
-				
7.	. What kind of debt do you have?			
	☑ Your debts are primarily consumer debts. Const	i umer debts are those "incu	urred by an individual primarily for a per	rsonal,
	family, or household purpose." 11 U.S.C. § 101(8).	Fill out lines 8-9g for statis	itical purposes. 28 U.S.C. § 159.	,
	☐ Your debts are not primarily consumer debts. Y	ou have nothing to report	on this part of the form. Check this box	and submit
	this form to the court with your other schedules.			
8.	From the Statement of Your Current Monthly Incom	e: Copy your total current	monthly income from Official	s 7,687.74
	Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Fo	im 1220-1 Line 14.		\$
-	,	I I		
		D		
9.	. Copy the following special categories of claims from	m Part 4, line 6 of Schedi	uie E/r:	
			Total claim	
:	granding and the second of the control of the contr	,		1
	From Part 4 on Schedule E/F, copy the following:		, 1	
i	L			
	9a. Domestic support obligations (Copy line 6a.)		\$0.0	<u>0</u>
		!	477.5	
	9b. Taxes and certain other debts you owe the governr	ment. (Copy line 6b.)	\$477.5	<u>8</u> .
ŀ		·	0.0	0
:	9c. Claims for death or personal injury while you were i	intoxicated. (Copy line 6c.)	, 5	<u>-</u>
ļ 1.	Od Student leans (Capy line 6f)	,	\$ 0.0	0
	9d. Student loans. (Copy line 6f.)	•	•	_ !
	9e. Obligations arising out of a separation agreement of	or divorce that you did not	report as \$ 0.0	0 :
	priority claims. (Copy line 6g.)	:		
	9f. Debts to pension or profit-sharing plans, and other	similar debts. (Copy line 6	Sh.) + \$0.0	<u>0</u>
!		1		-
ļi ļ	9g. Total. Add lines 9a through 9f.		\$477.5	8
ļi !				
1 i				!

Fill in this	s information to identify your case and this	filing:			• • •
Debtor 1	Frenny	Maria	ano		
Debtor 2	First Name Middle Name	Last Name			
	ling) First Name Middle Name	Last Name			
Case numb	tes Bankruptcy Court for the: Eastern District of No	ew York			
Case Humb					Check if this is an amended filing
Offici	al Form 106A/B		 		amended ming
	edule A/B: Property	,			42/45
	category, separately list and describe items		t only once If an asset fits in more	than one category, list	12/15
category responsi	where you think it fits best. Be as compleible for supplying correct information. If mour name and case number (if known). Answ	te and accura re space is n	te as possible. If two married people eeded, attach a separate sheet to th	e are filing together, bo	th are equally
Part 1:	Describe Each Residence, Building,	Land, or Oth	er Real Estate You Own or Ha	e an Interest in	
	u own or have any legal or equitable interes	t in any resid	ence, building, land, or similar prop	erty?	
	o. Go to Part 2. s. Where is the property?		1		
			property? Check all that apply.	Do not deduct secured cla	
1.1.	149 Haig Rd Street address, if available, or other description	Duplex of	or multi-unit building	Creditors Who Have Clair	ns Secured by Property.
		_	nium or cooperative tured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	ent property	\$400,000.00	\$400,000.00
	Valley Stream NY City State ZIP Code	Timesha	' ' '	Describe the nature of interest (such as fee	
; ;	,	☐ Other_	interest in the property? Check one.	the entireties, or a life	
	United States	Debtor 1	1		<u>'</u>
	County	Debtor 2	only and Debtor 2 only	☐ Check if this is co	mmunity property
		_	one of the debtors and another	(see instructions)	, , , ,
			mation you wish to add about this in	tem, such as local	
If you	own or have more than one, list here:		 	per manage. The same of the same of the same of	
		Single-far	property? Check all that apply.	Do not deduct secured cla the amount of any secure	
1.2.	Street address, if available, or other description	Duplex or	multi-unit building	Creditors Who Have Clair	-
		_	nium or cooperative ured or mobile home	Current value of the entire property?	Current value of the portion you own?
	-	Land	 - -	\$	\$
	City State ZIP Code	☐ Investmen	ė	Describe the nature of interest (such as fee	
			interest in the property? Check one.	the entireties, or a life	
 		Debtor 1 o	only		
	County	Debtor 2 o		[] a	
			and Debtor 2 only ne of the debtors and another	Check if this is co (see instructions)	mmunity property
;			nation you wish to add about this ite		

Official Form 106A/B Schedule A/B: Property

Case 8-18-76800-ast Doc 13 Filed 10/26/18 Entered 10/26/18 14:44:25 Mariano Case number (if known) 8-18-76800-ast Frenny Debtor 1 Middle Name Last Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? ■ Manufactured or mobile home Land ☐ Investment property Describe the nature of your ownership ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by ☐ Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 400,000.00 you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ✓ Yes toyota Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: highlander Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2013 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 32000 entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 18,000.00 18,000.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

Official Form 106A/B

Entered 10/26/18 14:44:25 Case 8-18-76800-ast Doc 13 Filed 10/26/18 Case number (if known) 8-18-76800-ast Mariano Frenny Debtor 1 First Name Middle Name Last Name Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☑ No Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2. Make: the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property. Debtor 1 only Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 18,000.00 you have attached for Part 2. Write that number here

Schedule A/B: Property

Case 8-18-76800-ast Doc 13 Filed 10/26/18 Entered 10/26/18 14:44:25 Case number (if known) 8-18-76800-ast Mariano Frenny Debtor 1 First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe...... see attached 1,000.00 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No	, , , , , , , , , , , , , , , , , , , ,		ļ
	computer, TV, IPhone, air purifier, dehumidifier, sound system	\$	700.00
8. Collectibles of value			į
	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
☑ No		\neg	
Yes. Describe		\$	
9. Equipment for sports a	nd hobbies		;
Examples: Sports, photo	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
¹ □ No			
Yes. Describe	Acoustic Guitar	\$	100.00
10. Firearms			
	shotguns, ammunition, and related equipment	•	
✓ No ☐ Yes. Describe			
i Tes. Describe		\$	· .
11. Clothes]
	thes, furs, leather coats, designer wear, shoes, accessories		1
No Ves. Describe	clethes shoos		500.00
	ciotiles, silves	\$	
12. Jewelry			
Examples: Everyday jew gold, silver	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, i		
☑ No		 -	
☐ Yes. Describe	į	\$	
13. Non-farm animals			
Examples: Dogs, cats, b	irds, horses		
☑ No	<u> </u>		
Yes. Describe	,	\$	
14. Any other personal and	household items you did not already list, including any health aids you did not list		
☑ No			
Yes. Give specific information		\$	
	f all of your entries from Part 3, including any entries for pages you have attached umber here	\$	
Official Form 106A/B	Schedule A/B: Property	The state of the s	page 4

Case 8-18-76800-ast Doc 13 Filed 10/26/18 Entered 10/26/18 14:44:25 Case number (if known) 8-18-76800-ast Mariano Frenny Debtor 1 First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 7. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No. ☐ Yes..... Institution name: Wells Fargo 300.00 17.1. Checking account: TD Bank ' 0.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☑ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture Name of entity: % of ownership: ☐ Yes. Give specific 0% information about them.....

Official Form 106A/B Schedule

Debtor 1	Frenny First Name	Middle Name	Maria Maria	ino	Case number (if known)_8	3-18-76800-ast	· · · · · · · · · · · · · · · · · · ·
			· ·				:
Negotia	able instruments i	nclude personal chec	er negotiable and no ks, cashiers' checks, nnot transfer to some	promissory notes, a	nd money orders.		
	s. Give specific rmation about	Issuer name:	;				
ther	m					\$_ \$_	· · · · · · · · · · · · · · · · · · ·
		•				\$_	
Examp	ment or pension les: Interests in IF		01(k), 403(b), thrift sav	i vings accounts, or o	ther pension or profit-sh	aring plans	:
	s. List each count separately.	Type of account:	Institution name:	,			
		401(k) or similar plan:		 		\$_	
1		Pension plan:		i 		\$_	
		IRA:		!		\$_	
!		Retirement account:		<u>. </u>		\$_	
1		Keogh:	•	·		\$_	<u> </u>
1		Additional account:		!		\$_	
-		Additional account:		1		\$_	
Your st		deposits you have m	ade so that you may o				
Yes	S	Ins	stitution name or individ	ual:			
1-	-	Electric:		1		\$_	·
		Gas:					
:		Security deposit on rer	ntal unit:	i i		\$_	1
İ		Prepaid rent:		1		\$ \$:
		Telephone:					
-		Water:		<u> </u>			
		Rented furniture:		1			!
		Other:		1		\$_	· · · · · · · · · · · · · · · · · · ·
23. Annuit ∷ ☑ No	-	r a periodic payment	of money to you, eithe	er for life or for a nur	nber of years)		
	S	Issuer name and des	cription:				
						\$_ \$	

Official Form 106A/B

Case number (if known) 8-18-76800-ast

Debtor 1	Frenny		Marian	10	Case number (18-76800-6	ast	
	First Name Middle Nam	me Last Name	!					
	4-1							
	ts in an education IRA, i .C. §§ 530(b)(1), 529A(b)		ualified ABLE	program, or ui	nder a qualified sta	ite tuition program.		
☑ No			1					
Yes	s	nstitution name and d	escription. Sep	parately file the	records of any intere	ests.11 U.S.C. § 521(c) :	
							•	
	-						\$	
			!				\$	•
	-					•	\$	
5. Trusts.	equitable or future inte	erests in property (of	her than anyt	hing listed in li	ne 1), and rights o	r powers		
	sable for your benefit	, , , , , , , , , , , , , , , , , , , ,	!	•		•		
☑ No	_						7	
	s. Give specific		,				\$	
11110	ormation about them							
6. Patents	s, copyrights, trademar	ks, trade secrets, an	: d other intelle	ctual property				
	les: Internet domain name							
No	_						_	
	s. Give specific						\$	
into	ormation about them] -	
7. Licens	es, franchises, and other	er general intangible	es :					
	les: Building permits, exc			tion holdings, lic	quor licenses, profes	ssional licenses		
☑ No								
	s. Give specific						7_	
info	ormation about them				· <u> </u>			
Aoney or	property owed to you?		** *		and the second of the second o	an an area areas ar areas at a re-	Current value of	 . f tha
noney or	property owed to you:			:	•		portion you ow	/n?
						-	Do not deduct sec claims or exemption	
8 Tax ref	funds owed to you							
☑ No	•						1	
	s. Give specific information	on				Federal:	· 0.	.00
	about them, including v you already filed the re	whether			:	State:	¥ <u></u> -	.00
	and the tax years						Ψ	.00
						Local:	Φ	
		•		•				
	/ support <i>oles:</i> Past due or lump sur	m alimonv. spousal su	upport, child su	pport, maintena	nce, divorce settlen	nent, property settleme	ent	
☑ No	·	,,		,	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	s. Give specific information	on						
	·					Alimony:	\$	
				· 		Maintenance:	\$	
	•			:		Support:	\$	
						Divorce settlement:	\$; e	
				1		Property settlement:	Φ	
0. Other	amounts someone owe	s you	nte dissbilité l	ionofite elektro	v vacation nov	rkars' companyation		
⊢xamp	oles: Unpaid wages, disab Social Security bene	ollity insurance payme efits; unpaid loans you			y, vacauon pay, wo	nicers compensation,		
. 🗹 No)					· .	_	
☐ Yes	s. Give specific information	on						
,								

Schedule A/B: Property

Case 8-18-76800-ast Doc 13 Filed 10/26/18 Entered 10/26/18 14:44:25 _{n)} 8-18-76800-ast Mariano Frenny Debtor 1 Case number (if know First Name Last Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value. ... Securian Niurqui Imbert 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Yes. Describe each claim. 35. Any financial assets you did not already list ☐ Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5: 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No ☐ Yes. Describe..... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ No ☐ Yes. Describe...

Schedule A/B: Property page 8

Debtor 1 Frenny First Name	Middle Name Las	Mariano	Case number (if known) 8-18-76800	-ast
		,		!
40. Machinery, fixtures, e	quipment, supplies yo	u use in business, and tools o	f your trade	!
□ No		· · · · · · · · · · · · · · · · · · ·		, ¬
Yes. Describe		<u> </u>		\$ <u>.</u>
41. Inventory		I		
l No □				7
Yes. Describe				\$
42.Interests in partnersh	ins or joint ventures	:		•
No No	iips of joint ventures			
☐ Yes. Describe	Name of entity:	:	% of ownership:	
			%	\$
!			% %	\$ \$
				*
43. Customer lists, mailir	ng lists, or other compi	lations		
	include personally ide	ntifiable information (as define	ed in 11 U.S.C. § 101(41A))?	
No Yes. Desc	oriho -			7
Tes. Desc	cribe			\$
44. Any business-related	property you did not a	Iready list	,	
□ No				
Yes. Give specific information				\$
		·		\$
		· · · · · · · · · · · · · · · · · · ·		\$
				\$
				\$
45 Add the dellar value	of all of your antring for	om Bart 5. including any entric	es for pages you have attached	<u> </u>
			ss for pages you have attached	\$
i I		1		,
Part 6: Describe A	any Farm- and Comm	ercial Fishing-Related Pro	perty You Own or Have an Interest I	n.
	r have an interest in fa			
46. Do you own or have a	any legal or equitable in	nterest in any farm- or comme	rcial fishing-related property?	
☑ No. Go to Part 7.		•		
Yes. Go to line 47.		!		Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
47. Farm animals Examples: Livestock,	poultry, farm-raised fish			
□ No				
Yes				
				\$

Official Form 106A/B

Case 8-18-	76800-ast Doc 13	Filed 10/26/18	Entered 10/26/18 14	1:44:25
Debtor 1 Frenny First Name Middle Nam	Maria • Lest Name	ino c	ase number (if known)_8-18-76800-	ast
48. Crops—either growing or harve	ested			
Yes. Give specific information				\$
49. Farm and fishing equipment, in No Yes	nplements, machinery, fixtures,	and tools of trade		· 1
		1		\$
50. Farm and fishing supplies, che	micals, and feed	: : :		. '
☐ Yes		,		\$
51. Any farm- and commercial fish	ing-related property you did not	already list		
Yes. Give specific information		<u> </u>		\$
52. Add the dollar value of all of yo for Part 6. Write that number h	our entries from Part 6, including	any entries for pages	you have attached	\$
Part 7: Describe All Prop	erty You Own or Have ar	Interest in That	You Did Not List Above	
53. Do you have other property of Examples: Season tickets, country clu		3		
✓ No ☐ Yes. Give specific information				\$ \$ \$
54. Add the dollar value of all of yo	our entries from Part 7. Write tha	t number here		\$
Part 8: List the Totals of	Each Part of this Form			
55. Part 1: Total real estate, line 2.			······	\$400,000.00
56. Part 2: Total vehicles, line 5		\$18,000.00		Control and the complete and the control and t
57. Part 3: Total personal and hous	sehold items, line 15	\$2,300.00		•
58. Part 4: Total financial assets, li	ne 36	\$300.00		
59. Part 5: Total business-related p	property, line 45	\$		
60. Part 6: Total farm- and fishing-	related property, line 52	\$	-	
61. Part 7: Total other property not	listed, line 54	+\$	1	
62. Total personal property. Add lin	es 56 through 61,	\$20,600.00	Copy personal property total 🗲	+\$20,600.00
63Total of all property on Schedu	le A/B. Add line 55 + line 62			\$420,600.00

3 beds, 3 dressers, 1 crib 2 couches, 1 coffee table, 2 chairs, small computer desk, small bench, lines, towels, refrigerator, stove, washer and dryer, dishwasher, microwave, plates and pods, utensils

Fill in this in	formation to identify y	our case:	
Debtor 1	Frenny		Mariano
	First Name	Middle Name	Last Name
Debtor 2			<u> </u>
(Spouse, if filing)	First Name	Middle Name	Last Name i
United States I	Bankruptcy Court for the: E	astern District of	New York
Case number	8-18-76800-ast		
(If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identi	fy the Property You Claim	as Exempt	<u> </u>		
	You are cla	iming state and federal nonbank iming federal exemptions. 11 U.	ruptcy exemptions			
2.	For any proper	rty you list on S <i>chedule A/B</i> th	nat you claim as e	exempt, fill in the information below.		
		on of the property and line on that lists this property	Current value of portion you own		Specific laws that allow exemption	
	ample of the second		Copy the value fro Schedule A/B	m Check only one box for each exemption.		
	Brief description:	149 Haig Rd Primary	\$ <u>400,000.00</u>		N.Y. Civil Practice Law § 5206(a)	
	Line from Schedule A/B:	1.1	_	☐ 100% of fair market value, up to any applicable statutory limit		
	Brief description:	toyota Highlander	\$ <u>18,000.00</u>	2 \$ 1.00	N.Y. Debtor and Creditor Law § 282(1)	
	Line from Schedule A/B:	.3.1		☐ 100% of fair market value, up to any applicable statutory limit	Law 3 202(1)	
	Brief description:	Household goods	\$ <u>1,000.00</u>	☑ \$ 1,000.00	N.Y. Civil Practice Law § 5205(a)	
	Line from Schedule A/B:	.6		☐ 100% of fair market value, up to any applicable statutory limit		
3.	Are you claim	ing a homestead exemption of	f more than \$160,	375?		
	(Subject to adju	ustment on 4/01/19 and every 3	years after that for	cases filed on or after the date of adjustment.)	
	☑ No					
	☐ Yes. Did yo	ou acquire the property covered	by the exemption	within 1,215 days before you filed this case?		
	☐ No					
	✓ Yes					

Debtor 1 Frenny Mariano Case number (if known) 8-18-76800-ast

	on of the property and line /B that lists this property		value of the you own	Amount of the exemption you claim	Specific laws that allow exemption
A COMPANY OF A COM		Copy the Schedule	value from	Check only one box for each exemption	
Brief description:	Electronics	\$	700.00	· _ ·	N.Y. Civil Practice Law § 5205(a)
ine from Schedule A/B:	7			☐ 100% of fair market value, up to any applicable statutory limit	
Brief lescription:	Acoustic Guitar	\$	100.00	4 \$100.00 □ 100% of fair market value, up to	N.Y. Civil Practice Law § 5205(a)
ine from Schedule A/B:	9			any applicable statutory limit	
Brief description:	clothes, shoes	\$	500,.00	☑ \$ 500.00	N.Y. Civil Practice Law § 5205(a)
Line from Schedule A/B:	11		į	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$!	_ 🗆 \$	
ine from Schedule A/B:	· ·			☐ 100% of fair market value, up to any applicable statutory limit	'
Brief description:		\$			
Line from Schedule A/B:			:	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	1	. 🗆 \$	•
Line from Schedule A/B:			<u> </u>	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	 	\$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	 	s	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	ļ	_ 🗆 \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		\$,
Line from Schedule A/B:			· · · · · · · · · · · · · · · · · · ·	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		_	
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		_ 🖳 \$	
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	

Debtor 1 Frenny Mariano Debtor 2 Mariano Lest Name Lest Name	
First Name Middle Name Lest Name	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Eastern District of New York	
9 19 76900 oct	
Case number (If known) Check if this amended file	
Official Form 106D	Ū
Caladala Da Onadittana Wila IIIana Olatina Olatina D	12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).	
1. Do any creditors have claims secured by your property? □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.	
☑ Yes. Fill in all of the information below.	
Dark All Secured Claims	
Part 1: List All Secured Claims Column A Column B Column B	lumn C
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order asserting to the creditor's page.	secured rtion ny
2.1 Bank of Ameica Describe the property that secures the claim: \$ 263,794.25 \$ 400,000.00 \$	0.00
Creditor's Name 4909 Saverese Circle 149 Haig Rd, Valley Stream, NY, 11581	
Number Street FL1-908-01-47 As of the date you file, the claim is: Check all that apply.	
Toologent Contingent	
Tampa FL 33634 Unliquidated City State ZIP Code Disputed	
Who owes the debt? Check one. Nature of lien. Check all that apply.	
Debtor 1 only An agreement you made (such as mortgage or secured	
Debtor 2 only car loan)	
Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit	
At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset)	
Check if this claim relates to a community debt	
Date debt was incurred Last 4 digits of account number	
2.2 Chase Mortgage Describe the property that secures the claim: \$ 19,980.10 \$ 400,000.00 \$	0.00
Creditor's Name PO BOX 24696 Number Street 149 Haig Rd, Valley Stream, NY, 11581	1
As of the date you file, the claim is: Check all that apply.	
Contingent Contingent	
Columbus OH 43224 Unliquidated City State ZIP Code Disputed	
Who owes the debt? Check one. Nature of lien. Check all that apply.	
Debtor 1 only An agreement you made (such as mortgage or secured	
Debtor 2 only car loan)	
Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit	
Other (including a right to offset)	
Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 9 3 7 0	
Add the dollar value of your entries in Column A on this page. Write that number here: \$ 283,774.35	

: Debto	_{r 1} Frenny	Maria	no Case num	ber (if known) 8-18-76	800-	ast	
}	First Name Middle Name	Last Name					
Part	Additional Page After listing any entries on this p by 2.4, and so forth.	age, number them begi	nning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.		e of collateral supports this	Column C Unsecured portion If any
	Toyota Motor Credit	Describe the property t	hat secures the claim:	\$ 20,643.00	\$	18,000.00	2,643.00
N	100 Bridgeport Ave	toyota highlander 2	2013				
	4th FL		the claim is: Check all that apply.	•		1	
	Shelton CT 06484 State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed ☐				:	
	no owes the debt? Check one. Debtor 1 only	Nature of lien. Check all	that apply. de (such as mortgage or secured			:	
	Debtor 2 only	car loan)					
. 🗆	Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from a	tax lien, mechanic's lien) awsuit				
	Check if this claim relates to a community debt	Other (including a righ	t to offset)				
Da	te debt was incurred	Last 4 digits of account	t number				
		Describe the property t	hat secures the claim:	\$	\$		5
	Creditor's Name						
: "	uniber Steet	As of the date you file,	the claim is: Check all that apply.	J			
· -		☐ Contingent☐ Unliquidated☐					
7	City State ZIP Code	Disputed	ı				
	no owes the debt? Check one.	Nature of lien. Check all	that apply.				
	Debtor 1 only Debtor 2 only	 An agreement you ma car loan) 	de (such as mortgage or secured				
		Statutory lien (such as	!				
	At least one of the debtors and another	☐ Judgment lien from a l☐ Other (including a righ		_			
	Check if this claim relates to a community debt	, ,	1				
Da	te debt was incurred	Last 4 digits of accoun	t number				
	Creditor's Name	Describe the property t	hat secures the claim:	\$. \$;	\$
_	Number Street						
	Autibe: Steet		<u> </u>				
		As of the date you file, Contingent	the claim is: Check all that apply.				
. 7	City State ZIP Code	Unliquidated Disputed	;			:	
w	ho owes the debt? Check one.	Nature of lien. Check all	that apply.			:	
11	Debtor 1 only	An agreement you ma	de (such as mortgage or secured				1
	Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as	s'tax lien, mechanic's lien)			!	,
I I —	At least one of the debtors and another	Judgment lien from a	lawsuit				
-	Check if this claim relates to a community debt	— Other (including a figh	it to onsety	_			
Da	ate debt was incurred	Last 4 digits of accoun	t number		7		
	Add the dollar value of your entries			\$304,417.35			
	If this is the last page of your form	, add the dollar value to	tals from all pages.	\$ 304,417.35			

				1
Debtor 1	Frenny		Mariano	Case number (if known) 8-18-76800-ast
Don't 2	First Name Middle Name	Last Name	hat You Alexado	History
agency you hav	s page only if you have others to	be notified about y debt you owe to s of the debts that y	our bankruptcy for omeone else, list th ou listed in Part 1, I	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, ist the additional creditors here. If you do not have additional persons
	Process of the process of the state of the s			On which line in Part 1 did you enter the creditor?
Nan	me			Last 4 digits of account number
Nun	nber Street	<u> </u>	:	
City		State	ZIP Code	
\sqcup				On which line in Part 1 did you enter the creditor?
Nar	ne		1	Last 4 digits of account number
Nur	mber Street		!	
			İ	
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Nar	me			Last 4 digits of account number
Nur	mber Street		-	- : · · · · · · · · · · · · · · · · · ·
				-
City	/	State	ZIP Code	-
				On which line in Part 1 did you enter the creditor?
Nar	me			Last 4 digits of account number
Nur	mber Street			- (
<u> </u>	·			- j
City	,	State	ZIP Code	-
			ļ	On which line in Part 1 did you enter the creditor?
Nar	me			Last 4 digits of account number
	mber Street		-	-
			<u>'</u>	-
City	у	State	ZIP Code	-
			(On which line in Part 1 did you enter the creditor?
Na	me		:	Last 4 digits of account number
Nu	mber Street			_ ; ;
-	· · · · · · · · · · · · · · · · · · ·			_
Cit	v	State	ZIP Code	_ : n

	800-asi Doc	13 Fileo		10/26/18 14	0	
						1
Fill in this information to identify yo	our case:					
Debtor 1 Frenny	-	Mariano				
First Name	Middle Name	Lest Name		1	;	
Debtor 2 (Spouse, if filing) First Name	Middle Neme	Lest Name	 .			
United States Bankruptcy Court for the: Ea	astern District of New	Vork				
9 19 76900 cot	astern District of New	;			☐ Chec	k if this is an
Case number (If known)					amer	nded filing
		·			,	
Official Form 106E/F						
Schedule E/F: Cred	ditors Who	Have l	Insecured Claii	ns		12/15
Be as complete and accurate as pos- List the other party to any executory A/B: Property (Official Form 106A/B) creditors with partially secured claim needed, copy the Part you need, fill i any additional pages, write your name	contracts or unexpi and on Schedule G: ns that are listed in S it out, number the en ne and case number	red leases that Executory Co Schedule D: Cr atries in the boa (if known).	could result in a claim. Also l ntracts and Unexpired Leases editors Who Have Claims Secu	ist executory con (Official Form 106 ared by Property.	tracts on Si G). Do not If more spac	chedule include any ce is
Part 1: List All of Your PRIOR	ITY Unsecured CI	aims				
1. Do any creditors have priority un	secured claims agai	inst you?				
☐ No. Go to Part 2. ☐ Yes.		i				
List all of your priority unsecured each claim listed, identify what type nonpriority amounts. As much as pu unsecured claims, fill out the Continuation.	of claim it is. If a clain ossible, list the claims nuation Page of Part 1	m has both prior in alphabetical . If more than or	ity and nonpriority amounts, list to order according to the creditor's ne creditor holds a particular clai	hat claim here and name. If you have	I show both p more than to	oriority and vo priority
(For an explanation of each type of	claim, see the instruc	tions for this for	m in the instruction booklet.)	Total claim	Priority	Nonpriority
1				Total Claim	amount	amount
2.1 State Of California Franch	ise Tax Bo	t 4 digits of acc	ount number 3 5 3 1	\$ <u>477.58</u>	s 477 58	3 s
	ioo iax bo Las					
Priority Creditor's Name					·	
Priority Creditor's Name PO BOX 942867 Number Street		en was the debt	40/04/0044	<u> </u>	·	
Priority Creditor's Name PO BOX 942867	Wh	en was the debt	incurred? <u>12/31/201</u> 4		·	
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA	Wh 94267	en was the debt			·	
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State	94267 As ZIP Code	en was the debt	incurred? <u>12/31/201</u> 4		·	:
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one	94267 As ZIP Code	en was the debt of the date you Contingent	incurred? <u>12/31/201</u> 4			
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one	94267	en was the debt of the date you Contingent Unliquidated Disputed	incurred? 12/31/2014 file, the claim is: Check all that app			;
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one	94267	of the date you Contingent Unliquidated Disputed De of PRIORITY	incurred? 12/31/2014 iile, the claim is: Check all that app			
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only	94267	en was the debt of the date you Contingent Unliquidated Disputed Disputed De of PRIORITY Domestic support	incurred? 12/31/2014 file, the claim is: Check all that appured claim: obligations	oly.		
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Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and and Check if this claim is for a cord is the claim subject to offset? No	94267 ZIP Code Typother other mmunity debt	of the date you Contingent Unliquidated Disputed De of PRIORITY Domestic support Taxes and certain Claims for death intoxicated	incurred? 12/31/2014 file, the claim is: Check all that appuals the claim is: Check all that appuals the claim: unsecured claim: obligations other debts you owe the government	oly.		
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Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a cord Is the claim subject to offset? No Yes 2.2 Priority Creditor's Name Number Street City State Who incurred the debt? Check one	Mh 94267 ZIP Code Typ other mmunity debt Las Wh ZIP Code	of the date you Contingent Unliquidated Disputed Domestic support Taxes and certain Claims for death intoxicated Other. Specify st 4 digits of acceen was the debt of the date you Contingent Unliquidated Disputed	incurred? 12/31/2014 file, the claim is: Check all that applications another debts you owe the government or personal injury while you were count number	oly.		\$
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Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a cord Is the claim subject to offset? No Yes 2.2 Priority Creditor's Name Number Street City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and and Check if this claim is for a cord Is the claim subject to offset?	What should be s	contingent Unliquidated Disputed Disput	incurred? 12/31/2014 iile, the claim is: Check all that applications obligations other debts you owe the government or personal injury while you were ount number	s		\$
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and and Check if this claim is for a cord Is the claim subject to offset? No Yes 2.2 Priority Creditor's Name Number Street City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Check if this claim is for a cord Check if this claim is for a cord Is the claim subject to offset? No No	Mh 94267 ZIP Code 3. Typ other mmunity debt Las Wh ZIP Code 3. Typ cother mmunity debt	contingent Unliquidated Disputed Disput	incurred? 12/31/2014 iile, the claim is: Check all that applications obligations other debts you owe the government or personal injury while you were incurred? file, the claim is: Check all that applications other debts you owe the government or personal injury while you were	s		\$
Priority Creditor's Name PO BOX 942867 Number Street SACRAMENTO CA City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a cord Is the claim subject to offset? No Yes 2.2 Priority Creditor's Name Number Street City State Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and and Check if this claim is for a cord Is the claim subject to offset?	Mh 94267 ZIP Code 3. Typ other mmunity debt Las Wh ZIP Code 3. Typ cother mmunity debt	contingent Unliquidated Disputed Disput	incurred? 12/31/2014 iile, the claim is: Check all that applications obligations other debts you owe the government or personal injury while you were incurred? file, the claim is: Check all that applications other debts you owe the government or personal injury while you were	s		\$

Frenny Mariano Case number (if known) 8-18-76800-ast Debtor 1 Part 1: Your PRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated ZIP Code □ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only ☐ Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated State ZIP Code ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify is the claim subject to offset? ☐ No ☐ Yes

Case number (if known) 8-18-76800-ast Mariano Debtor 1 Part 2: **List All of Your NONPRIORITY Unsecured Claims** 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim American Express Last 4 digits of account number 2 0 0 5 1,092.00 Nonpriority Creditor's Name 04/07/2017 When was the debt incurred? PO Box 1270 Number Newark NJ 07101 As of the date you file, the claim is: Check all that apply. ZIP Code City State Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts **✓** No Other. Specify _ Yes 6,552.00 Last 4 digits of account number BANK OF AMERICA 12/31/2017 When was the debt incurred? Nonpriority Creditor's Name PO BOX 982238 Number Street As of the date you file, the claim is: Check all that apply. **EL PASO** TX 79998 ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ **☑** No ☐ Yes BANK OF AMERICA Last 4 digits of account number 9 5 5 9 2,569.00 Nonpriority Creditor's Name 12/31/2017 When was the debt incurred? PO BOX 982238 Number Street **EL PASO** 79998 TX As of the date you file, the claim is: Check all that apply. ZIP Code City Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ■ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset?

Other. Specify_

Debts to pension or profit-sharing plans, and other similar debts

√ No

☐ Yes

Case 8-18-76800-ast Doc 13 Filed 10/26/18 Entered 10/26/18 14:44:25 Mariano Case number (If known) 8-18-76800-ast Frenny Debtor 1 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total claim** 4.4 Last 4 digits of account number 9 7 6 1 Bank of America 803.43 Nonpriority Creditor's Name 09/19/2018 When was the debt incurred? PO BOX 982284 Number As of the date you file, the claim is: Check all that apply. El Paso TX 79998 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? other. Specify overdrawn closed account **☑** No ☐ Yes 4.5 Last 4 digits of account number 5 2 3 3 \$ 7,682.00 Capital One Nonpriority Creditor's Name 12/31/2017 When was the debt incurred? PO Box 6492 Number Street As of the date you file, the claim is: Check all that apply. Carol Stream IL 60197 State ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one. □ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify credit card ₩ No ☐ Yes s 4,407.17 4.6 Last 4 digits of account number 8 5 0 7 Chase Card Service Nonpriority Creditor's Name 02/24/2017 When was the debt incurred? PO Box 15548 Number As of the date you file, the claim is: Check all that apply. CA 19886 Wilmington State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only

□ Contingent □ Unliquidated □ Disputed	
Type of NONPRIORITY unsecured claim:	
 □ Student loans □ Obligations arising out of a separation agreement or divorce the you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify <u>credit card</u> 	
`	

☑ No ☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

■ At least one of the debtors and another

☐ Check if this claim is for a community debt

Frenny First Name Mariano

Case number (if known) 8-18-76800-ast

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Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number then	n beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.7	Chase Bank	:	Last 4 digits of account number 2 7 3 0	\$_1,350.54
	Nonpriority Creditor's Name PO Box 659732		When was the debt incurred? 07/31/2018	
	Number Street San Antonio TX	78265	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one. Debtor 1 only	ZIP Code	Contingent Unliquidated Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? ☑ No □ Yes	:	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Overdrawn closed checking	
4.8	CitiBank Nonpriority Creditor's Name		Last 4 digits of account number 7 3 0 3	\$ <u>4,598.07</u>
	PO Box 70166		When was the debt incurred? 12/15/2016	
	Number Street Philadelphia NY	19176	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? ✓ No □ Yes	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.9	Discover	; ;	Last 4 digits of account number 4 9 2 1	\$ 2,563.78
	Nonpriority Creditor's Name 27005 PO Box 71084		When was the debt incurred? 07/20/2018	
	Number Street Charlotte NC City State	28272 ZIP Code	As of the date you file, the claim is: Check all that apply. — Contingent	
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes		Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify hospital bill	: ! :

Case number (if known) 8-18-76800-ast Frenny Mariano Debtor 1 First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: Total claim After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Last 4 digits of account number 8 0 1 7 362.88 Long Island Jewish Medical Center Nonpriority Creditor's Name 04/08/2018 When was the debt incurred? 27005 76th Ave Number Street As of the date you file, the claim is: Check all that apply. NY New Hyde Park 11787 State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? other. Specify hospital bill **☑** No Yes 4.0 Last 4 digits of account number 5 9 9 8 233.83 North Shore University Hospital at Manhasset Nonpriority Creditor's Name 08/24/2017 When was the debt incurred? PO BOX 9036 Number Street As of the date you file, the claim is: Check all that apply. NY Syosset 11791 State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed ☑ Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify hospital ☑ No ☐ Yes 125.62 14.12 Last 4 digits of account number 8 6 8 3 Northwell Health Nonpriority Creditor's Name 03/31/2018 When was the debt incurred? PO Box 28372 As of the date you file, the claim is: Check all that apply. NY 10087 New York State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify Noah Mariano son ₩ No ☐ Yes

Frenny Mariano Case number (if known) 8-18-76800-ast Debtor 1 Middle Name Lest Name Part 2: **Your NONPRIORITY Unsecured Claims — Continuation Page** After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 5 2 1 6 North Shore LIJ Medical Group 111.25 Nonpriority Creditor's Name 04/08/2018 When was the debt incurred? PO BOX 33720 Number As of the date you file, the claim is: Check all that apply. NY 48232 Detroit City State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other Specify hospital ₩ No ☐ Yes 414 Last 4 digits of account number 2 9 6 8 337.66 South Nassau Community Hospital Nonpriority Creditor's Name 04/19/2018 When was the debt incurred? PO BOx 9036 Number As of the date you file, the claim is: Check all that apply. NY 11791 Syosset State ZIP Code □ Contingent Unliquidated Who incurred the debt? Check one. □ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? other. Specify hospital M No Yes 14.15 817.66 Last 4 digits of account number 6 3 3 9 South Nassau Community Hospital Nonpriority Creditor's Name 08/14/2018 When was the debt incurred? PO Box 5635 As of the date you file, the claim is: Check all that apply. NY Hicksville 11802 ZIP Code Contingent State ■ Unliquidated Who incurred the debt? Check one. ☐ Disputed ☑ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify Catalina Mariano ₩ No Yes

Debto	r 1 Frenny First Name Middle Name	Mari Last Name	iano Case number (#known) 8-18-76800-ast	1 1
Part	2: Your NONPRIORITY Unsec	cured Claims — Conti	inuation Page	: . :
After	listing any entries on this page, nu	mber them beginning w	with 4.4, followed by 4.5, and so forth.	Total claim
4.16	Synchrony Bank/Amazon Nonpriority Creditor's Name		Last 4 digits of account number 4 5 4 4 When was the debt incurred? 04/04/2017	\$_1,631.43
	PO Box 960013 Number Street Orlando City Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communis the claim subject to offset?	fl 32896 State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit card	i
4.14	Target Card Services Nonpriority Creditor's Name PO Box 660170 Number Street Dallas City Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 2 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community the claim subject to offset? ✓ No □ Yes	TX 75266 State ZIP Code	Last 4 digits of account number 4 5 4 4 When was the debt incurred? 12/31/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit CArd	•
4.18	TD BAnk Nonpriority Creditor's Name PO BOX 5093 Number Street MT Laurel City Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community the claim subject to offset? No Yes	NJ 09054 State ZIP-Code	Last 4 digits of account number 6 0 9 0 When was the debt incurred? 08/31/2018 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Overdrawn Checking	

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Case number (if known) 8-18-76800-ast

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Your NONPRIORITY Unsecured Claims — Continuation Page

A Varian		I and distance of the second s	.1.
— verizon		Last 4 digits of account number	\$ <u>220.8</u>
Nonpriority Creditor's Name 500 Technology Dr		When was the debt incurred? 03/01/2018	
Number Street Weldon Spring	MO 6330	As of the date you file, the claim is: Check all that apply.	
	ZIP Code	<u>4</u>	
Witnthrop- University Hospital Nonpriority Creditor's Name		Last 4 digits of account number 1 0 1 y When was the debt incurred? 04/14/2018	\$ <u>380.</u> 4
PO Box 9562		when was the debt incurred?	
Number Street Uniondale	NY 115	As of the date you file, the claim is: Check all that apply.	
	tate ZIP Code		
Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a communit is the claim subject to offset? ✓ No □ Yes	ty debt	Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Catalina Mariano hospital	,
<u></u>		Last 4 digits of account number	\$
Nonpriority Creditor's Name		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	1
City	State ZIP Cod	- Contangona	1
Who incurred the debt? Check one. ☐ Debtor 1 only		☐ Unliquidated☐ Disputed☐	:
Debtor 2 only		Type of NONPRIORITY unsecured claim:	1 :
Debtor 1 and Debtor 2 only		Student loans	
☐ At least one of the debtor's and another☐ Check if this claim is for a communit	hı deht	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	;
Is the claim subject to offset?	iy debi	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	,

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Case number (if known) 8-18-76800-ast

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List Others to Be Notified About a Debt That You Already Listed

example, if a collection agency is trying to collect from you f 2, then list the collection agency here. Similarly, if you have m	ur bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or lore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.				
United Collection Bureau, Inc.	On which entry in Part 1 or Part 2 did you list the original creditor?				
PO BOX 140310	Line 4,3 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Stre é t	Part 2: Creditors with Nonpriority Unsecured Claims				
To bedo OH 43614 City State ZIP Code	Last 4 digits of account number $\frac{2}{3}$ 0 3				
Alliance One	On which entry in Part 1 or Part 2 did you list the original creditor?				
4850 Street Rd Number Street	Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Trevose PA 19053 State ZIP Code	Last 4 digits of account number 4 5 4				
E GS Financial Care, Inc.	On which entry in Part 1 or Part 2 did you list the original creditor?				
PO BOX 1020	Line Hoof (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street 806	Part 2: Creditors with Nonpriority Unsecured Claims				
Horsham PA 19044 City State ZIP Code	Last 4 digits of account number <u>6</u> <u>3</u> <u>3</u> <u>3</u> <u>3</u>				
Mulloly, Jeffrey, Roonly & Flynn	On which entry in Part 1 or Part 2 did you list the original creditor?				
Po Box 9036	Line 4,14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Nurhber Street					
Sy 055et NY 11791 City State ZIP Code	Last 4 digits of account number 2 9 63				
Mulloly, Jeffrey Kooney & Flynni	On which entry in Part 1 or Part 2 did you list the original creditor?				
POBeax 9036	Line (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street	Claims Part 2: Creditors with Nonpriority Unsecured				
Synsset MY 1791 City State ZIP Code	Last 4 digits of account number 5 9 9 8				
Computer Credit, Inc.	On which entry in Part 1 or Part 2 did you list the original creditor?				
POBOX 5258	Line 420 (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims				
winston Salem NC 27113 City State ZIP Code	Last 4 digits of account number $\frac{1}{2}$ $\frac{1}{2}$				
Name	On which entry in Part 1 or Part 2 did you list the original creditor?				
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street	Claims Part 2: Creditors with Nonpriority Unsecured				
City State ZIP Code	Last 4 digits of account number				

Frenny

Name Last Name

Case number (if known) 8-18-76800-ast

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

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			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
rom Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$477.58
	6c. Claims for death or personal injury while you we intoxicated	e re 6c.	\$
, ,	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$
	6e. Total. Add lines 6a through 6d.	6e.	\$477.58
		· ! ,	Total claim
Total claims	6f. Student loans	: : 6f.	\$.
rom Part 2	6g. Obligations arising out of a separation agreeme or divorce that you did not report as priority claims	nt 6g.	\$
3	6h. Debts to pension or profit-sharing plans, and ot similar debts	her 6h.	\$
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ 36,758.13
	6i, Total. Add lines 6f through 6i.	: : 6j.	36 758 13

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Fill in	this inf	ormation to ident	ify your ca	ise:			
Debtor	_	Frenny First Name	Middle	o Name	Mariano Last Name		
Debtor	2						:
	offiling)			District of New York	Last Name		
		8-18-7-68			`		
(If know	m)	2 10 100	م جي				Check if this is an amended filing
-							ag
Offic	ial F	orm 106G					
Sch	edu	le G: Exe	cuto	ry Contra	cts and	Unexpired Leases	12/15
informa addition 1. Do 2. Lis ex	you ha No. Ch Yes. F	more space is ne es, write your nar ave any executory neck this box and fi ill in all of the infon- rately each persor rent, vehicle lease	eded, copy ne and cas contracts le this form mation belo	y the additional pa se number (if know s or unexpired leas with the court with ow even if the contra	ge, fill it out, num es? your other scheducts or leases are	gether, both are equally responsible for suppose the entries, and attach it to this page. Coules. You have nothing else to report on this formulated on Schedule A/B: Property (Official Formulated or lease. Then state what each contract or in the instruction booklet for more examples of	n the top of any n. 106A/B). r lease is for (for
·	expired						
.Pe	rson or	company with w	nom you n	nave the contract o	riease	State what the contract or lease is fo	or
2.1							,
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Nu	umber	Street					
Cit	ty		State	ZIP Code			
2.2							
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N	umber	Street					,
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└	ame					-	
N	umber	Street				-	
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a Ci	ITV		State	ZIP Code	:		

Debt	or 1	First Name	Middle Name	Lest Name	Mariano	Case number (if known)	_
_					;	•	
					acts or Leases		
	Person	or company	y with whom you	have the contrac	t or lease	What the contract or lease is for	
2 <u>2</u>					1		
	Name						
	Number	Street				!	
	City		State	ZIP Code	-		
2					THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON OF THE PE		
ľ	Name					•	
	Number	Street					
	City		State	ZIP Code			
	Oity		Olaic	ZIF COUE			
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2					<u> </u>		
	Name						
	Numbe	r Street					
	City		State	ZIP Code	!		
2	~~~~					alan aran sanggalan aranggan alah di mininggangan makan alan alan sanggan dan katan di malam mininggan arangga Tanggan aranggan sanggan sangg	
	Name						
	Numbe	r Street					
	City		State	ZIP Code			

Fill in	n this information to identify yo	ur case:	i			
			ione			:
Debto	First Name	Middle Name Lest N	iano _{eme}			
Debto		Mildle No.				
	se, if filing) First Name	Middle Name Last N	ame 			
United	d States Bankruptcy Court for the: Ea	stern District of New York				
Case (If kno	number <u>8-18-76800-ast</u>				_	
(ii Kilo			1			eck if this is an
					am	ended filing
Offic	cial Form 106H					1
Sch	nedule H: Your (Codebtors	<u> </u>			12/15
are filing and nu case n	ng together, both are equally re	esponsible for supplying colon the left. Attach the Additi y question.	rrect information. onal Page to this	If more s page. On	nplete and accurate as possible. If two space is needed, copy the Additional P the top of any Additional Pages, write debtor.)	age, fill it out,
1	1 No	ou are ming a joint oute, as in		0 00 0 000		:
	Yes					
A	/ithin the last 8 years, have you rizona, California, Idaho, Louisian No. Go to line 3.		1 -		nmunity property states and territories inc n, and Wisconsin.)	lude
	Yes. Did your spouse, former s	spouse, or legal equivalent live	with you at the tin	ne?		
	□ No					
	Yes. In which community s	tate or territory did you live?	alifornia	Fill in	the name and current address of that pe	rson.
		-				
	Name of your spouse, former spou	ise, or legal equivalent	1	_		,
	149 Haig Rd	oo, or legal equivalent				1
	Number Street		<u>:</u>			
	Valley Stream	NY	11581			
-	City	State	ZIP Code	_		:
s S	hown in line 2 again as a codel	otor only if that person is a g , <i>Schedule E/F</i> (Official Forn	guarantor or cosig	gner. Mak	ur spouse is filing with you. List the pe te sure you have listed the creditor on Official Form 106G). Use Schedule D,	rson
1	Column 1: Your codebtor			!	Column 2: The creditor to whom you	owe the debt
			L	i	Check all schedules that apply:	
3.1			!		☐ Schedule D, line	
	Name				Schedule E/F, line	
	Number Street		!		☐ Schedule G, line	,
			<u> </u>			
0.5	City	State	ZIP Code			-
3.2					☐ Schedule D, line	
	Name		!		☐ Schedule E/F, line	i :
	Number Street				☐ Schedule G, line	
	City	Clata	7ID Code			,
22	City	State	ZIP Code			
3.3	Name		,		☐ Schedule D, line	
	Name			• •	☐ Schedule E/F, line	
	Number Street				☐ Schedule G, line	
	City	State	ZIP Code			
1 -						

Schedule H: Your Codebtors

page 1 of ____

		Frenny First Name Middle Name	Maria	no	Case number (if known) 8-18-76800-ast			
		First Name Middle Name	Last Name		•			
		Additional Page to List I	lore Codebtors	I				
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the	debt		
3				ļ	Check all schedules that apply:			
<u>v.</u>				. <u>i</u>	Schedule D, line			
	Name				☐ Schedule E/F, line			
	Number	Street			Schedule G, line			
	, rame o	1		,				
<u> </u>	City		State	ZIP Code				
3					Schedule D, line			
	Name			F	Schedule E/F, line			
	Number	Street			Schedule G, line			
	Muniber	Sueer		i,				
<u> </u>	City		State	ZIP Code				
3					Cabadula D. Vaa			
Ш	Name				Schedule D, line			
i					Schedule G, line			
	Number	Street			oriedate of line			
	City		State	ZIP Code				
3								
	Name				Schedule D, line			
		•		1	Schedule E/F, line			
	Number	Street			Schedule G, line			
	011		State	ZIP Code				
3	City		State	ZIP Code				
	Name				Schedule D, line			
	rano			:	☐ Schedule E/F, line			
	Number	Street		,	Schedule G, line			
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	City		State	ZIP Code	·	·		
3	Name				Schedule D, line			
١.	Name				☐ Schedule E/F, line			
	Number	r Street			Schedule G, line			
				i	<u> </u>			
	City		State	ZIP Code				
3				1	Schedule D, line			
	Name			•	☐ Schedule E/F, line			
	Number	r Street			Schedule G, line			
						i		
9 [City		State	ZIP Code	· · ·	'		
3					Schedule D, line			
	Name				Schedule E/F, line			
	Numbe	r Street			Schedule G, line			
	. 14.1156			•				
	City		State	ZIP Code				

page ___ of ___

Fill in this informa	tion to identify y	our case:						
Debtor 1 Fren	inv		Maria	ano		•		1
First Na			ast Name		-			
Debtor 2 (Spouse, if filing) First Na	me	Middle Name 1.	est Name	е	-			
United States Bankrup	otcy Court for the: E	astern District of New York						
Case Hulliber	8-76800-ast		!			Check if th	is is:	
(If known)			_			An ame	•	i
				•			lement showing postper as of the following date	
Official Form	106I					MM / DE	D/ YYYY	
Schedule	e I: You	r Income	į					12/15
supplying correct in If you are separated separate sheet to the	nformation. If yo I and your spou	ssible. If two married peop u are married and not filin se is not filing with you, do top of any additional page	g join o not	ntly, and your sp include informa	ouse is li tion abou	iving with your spou	ou, include information a ise. If more space is nee	bout your spouse. ded, attach a
1. Fill in your emp	loyment			Debtor 1			Debtor 2 or non-filin	a spouso
information.	than one ich			peptor 1	·		Deptor 2 of Hon-Hill	y spouse
If you have more attach a separate information about employers.	e page with	Employment status		Employed Not employed			Employed Not employed	:
Include part-time self-employed w			_					:
Occupation may or homemaker, i	include student	Occupation	Sma	all Business F	Relations	ship Mng	Housewife	
		Employer's name	San	ntander Bank			N/A	
		Employer's address	711	3rd Ave			Number Street	
				J. Street				
~								
		_		w York	NY	10017		,
		11	City	1	te ZIP C	ode	,	tate ZIP Code
		How long employed there	er 4	4 Months			4 Months	1
Part 2: Give	Details About	Monthly Income						
		the date you file this form	. If yo	u have nothing to	report fo	r any line, wr	ite \$0 in the space. Include	e your non-filing
If you or your no	ou are separated n-filing spouse ha ed more space, at	ive more than one employer ttach a separate sheet to this	, com	bine the informat	ion for all	employers fo	or that person on the lines	
	,			1	For	Debtor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (bef calculate what the monthly t			\$ 6	,538.48	\$0.00	
3. Estimate and I	ist monthly over	time pay.		3.	+\$	0.00	+ \$ 0.00	
4. Calculate gros	ss income. Add li	ne 2 + line 3.		4.	\$_6	,538.48	\$0.00	

Debtor 1 Frenny Mariano Case number (if known) 8-18-76800-ast

'		Fo	r Debtor 1	For Debtor 2 or non-filing spous	ie
Copy line 4 here	→ 4.	\$_	6,538.48	\$0.0	<u>o</u> .
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$	1,230.78	\$0.0	10
5b. Mandatory contributions for retirement plans	5b.	Ψ_ \$	0.00	\$0.0	
5c. Voluntary contributions for retirement plans	5 c .	\$_ \$	0.00	\$ 0.0	
5d. Required repayments of retirement fund loans	5d.	\$	0.00	s 0.0	
5e. Insurance	5e.	\$_ \$	766.02	s 0.0	
5f. Domestic support obligations	5f.	\$_ \$	0.00	s 0.0	
5g. Union dues		\$_ \$	0.00	s 0.0	
5h. Other deductions. Specify:	5g. 5h.	+\$	0.00	+ \$ 0.0	
		-		·	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h		\$_	1,996.80	\$0.0	
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,541.68	\$0.0	<u>10</u>
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$0.0	00_
8b. Interest and dividends	8b.	\$	0.00	s 0.0	00
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ent	-		,	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$0.0	00
8d. Unemployment compensation	8d.	\$_	0.00	\$0.0	00
8e. Social Security	8e.	\$_	0.00	\$0.0	00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$_	_0.00	\$ 0.0	
8g. Pension or retirement income		•	0.00	\$ 0.0)0
	8g.	φ		· <u> </u>	
8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	8h. 9.	+ \$_ \$_	0.00	+\$ 0.0 \$ 0.0	_
10. Calculate monthly income. Add line 7 + line 9.		_	4.544.00		
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	4,541.68	+ \$ 0.0	00 \$4,541.68
11. State all other regular contributions to the expenses that you list in Scholinclude contributions from an unmarried partner, members of your household,			ents. vour roo	ommates, and other	
friends or relatives.	,	•	.,,		
Do not include any amounts already included in lines 2-10 or amounts that are Specify:			e to pay exper	nses listed in <i>Schedul</i> d	e <i>J.</i> 11. + \$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain				,	\$4,541.68
13. Do you expect an increase or decrease within the year after you file this	form	,			monthly income
Yes. Explain:				·	

Fill in this information to identify	your case:			
Debtor 1 Frenny First Name	Mariano Middle Name Lest Name	Check if this	is.	•
Debtor 2	Middle Name Lest Name	————		
(Spouse, if filing) First Name	Middle Name Lest Name	I	ment showing postp	etition chapter 13
United States Bankruptcy Court for the: I	Eastern District of New York		s as of the following	
Case number (If known) 8-18-76800-ast		MM / DD /	YYYY	
Official Form 106J				•
Schedule J: You	ur Expenses			12/15
	ssible. If two married people are filied, attach another sheet to this form			
Part 1 Describe Your Hou	sehold	,		
1. Is this a joint case?				
☑ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a s	eparate household?			
☑ No				
Yes. Debtor 2 must file	Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
Do you have dependents? Do not list Debtor 1 and	☐ No ☑ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2.	each dependent	Step Daughter	16	□ No
Do not state the dependents' names.	!	Step Daugnter	10	☑ Yes
		Son	3	□ No ☑ Yes
		Dawahtaa	4	□ No
	1 1 1	<u>Daughter</u>	1	☑ Yes
	-	Wife	35	☐ No ☑ Yes
· .			·	□ No □ Yes
3. Do your expenses include expenses of people other than	☑ No □ Yes			
yourself and your dependents?				
	ng Monthly Expenses			
1	bankruptcy filing date unless you a kruptcy is filed. If this is a supplem			· ·
applicable date.		,		,
-	n-cash government assistance if yo		Your expe	neae
	I it on Schedule I: Your Income (Off			
any rent for the ground or lot.	expenses for your residence. Include	e mai mongaye payments and	4. \$	2,360.28
If not included in line 4:	ļ		4- 6	0.00
4a. Real estate taxes	ontorio incursos		4a. \$	0.00
4b. Property, homeowner's, or r	:		4b. \$ 4c. \$	100.00
Home maintenance, repair, Homeowner's association o			4d. \$	0.00
4u. Homeowile 3 association 0	condentinant dage		·	

Debtor 1 Frenny Mariano Case number (if known) 8-18-76800-ast

Subtlines: 5. Electricity, heat, natural gas 6. Water, sewer, garbage collection 6. Water, sewer, garbage collection 6. Cher Specify: 7. Food and housekeeping supplies 7. Seod and housekeeping supplies 8. 0.0 6. Citothing, laundry, and dry cleaning 7. Cold and housekeeping supplies 8. 0.0 7. Cold and housekeeping supplies 8. 0.0 7. Cold and housekeeping supplies 8. 0.0 9. Citothing, laundry, and dry cleaning 9. 100.0 9. Personal care products and services 10. \$100.0 11. Medical and dental expenses 11. \$40.0 2. Transportation, include gas, maintenance, bus or train fare. Do not include care payments. 2. Entertainment, clubs, recreation, newspapers, magazines, and books 4. Charitable contributions and religious donations 5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. O.0 3. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 5. Installment or lease payments: 17a. Care payments for Vehicle 1 17b. Care payments for Vehicle 2 17c. Other. Specify: 17d. O	1	!	Your exp	penses
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 1944.0 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 1945.0 6c. Other. Specify: 7. Food and housekeeping supplies 7. \$ 800.0 8. Childcare and children's education costs 8. \$ 0.0 8. Childcare and children's education costs 9. \$ 100.0 9. Personal care products and services 10. \$ 100.0 9. Personal care products and services 11. \$ 40.0 9. Personal care products and services 11. \$ 40.0 9. Personal care products and services 11. \$ 40.0 9. Childcare and dental expenses 11. \$ 40.0 9. Personal care products and services 11. \$ 40.0 9. Childcare and dental expenses 12. \$ 360.0 9. Personal care products and services 13. \$ 0.0 9. Childcare and dental expenses 14. \$ 360.0 9. Personal care products and services 15. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 9. Charitable contributions and religious donations 14. \$ 0.0 9. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify. 15d. Other insurance. Specify. 15d. Other insurance of this ins	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	154.03
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 1944.0 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 1945.0 6c. Other. Specify: 7. Food and housekeeping supplies 7. \$ 800.0 8. Childcare and children's education costs 8. \$ 0.0 8. Childcare and children's education costs 9. \$ 100.0 9. Personal care products and services 10. \$ 100.0 9. Personal care products and services 11. \$ 40.0 9. Personal care products and services 11. \$ 40.0 9. Personal care products and services 11. \$ 40.0 9. Childcare and dental expenses 11. \$ 40.0 9. Personal care products and services 11. \$ 40.0 9. Childcare and dental expenses 12. \$ 360.0 9. Personal care products and services 13. \$ 0.0 9. Childcare and dental expenses 14. \$ 360.0 9. Personal care products and services 15. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 9. Charitable contributions and religious donations 14. \$ 0.0 9. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify. 15d. Other insurance. Specify. 15d. Other insurance of this ins	6. Utilities:			
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6d. Other. Specify: 6d. \$	6b. Water, sewer, garbage collection	6b.	\$_	80.00
7. Food and housekeeping supplies 7. \$ 800.00 8. Childcare and children's education costs 8. \$ 0.0 9. Clothing, laundry, and dry cleaning 9. \$ 100.00 9. Clothing, laundry, and dry cleaning 9. \$ 100.00 9. Personal care products and services 10. \$ 100.00 1. Medical and dental expenses 11. \$ 40.00 2. Transportation. Include gas, maintenance, bus or train fare.	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	284.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 100.0 10. Personal care products and services 10. \$ 100.0 11. Medical and dental expenses 11. \$ 40.0 12. Transportation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. \$ 60.0 15. Insurance. 15. Insurance. 15. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance i	6d. Other. Specify:	6d.	\$	
Ciching, laundry, and dry cleaning e. \$ 100.0	7. Food and housekeeping supplies	7.	\$	800.00
10. 10.	8. Childcare and children's education costs	8.	\$	0.00
Medical and dental expenses	9. Clothing, laundry, and dry cleaning	9.	\$	100.00
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Do not include car payments. 12.	1. Medical and dental expenses	11.	\$	40.00
Section Sect	•	12.	\$	360.00
4. Charitable contributions and religious donations 14. \$ 60.0 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. S 0.0 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16c. S 0.0 17c. Car payments for Vehicle 1 17a. S 490.0 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other ayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. O.0 19. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.0 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses		13.	\$	0.00
Insurance				00.00
15b. Health insurance	5. Insurance.			,
15c. Vehicle insurance	15a. Life insurance	15a.	\$	0.00
15d. Other insurance. Specify:	15b. Health insurance	15b.	\$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	15c. Vehicle insurance	15c.	\$	268.00
Specify:	15d. Other insurance. Specify:	15d.	\$	0.00
17a. Car payments for Vehicle 1 17a. \$		16.	\$	0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 9. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.0 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20d. Maintenance, repair, and upkeep expenses	7. Installment or lease payments:			
17c. Other. Specify:	17a. Car payments for Vehicle 1	17a.	\$	490.00
17d. Other. Specify: 17d. \$ 0.0 3. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 3. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.0 3. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20d. Maintenance, repair, and upkeep expenses	17b. Car payments for Vehicle 2	17 b.	\$	0.00
17d. Other. Specify:	17c. Other Specify:	17c.	\$	0.00
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0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20d. \$ 0.0	9. Other payments you make to support others who do not live with you.	10	¢	0.00
20a. Mortgages on other property 20a. \$			Ψ	0.00
20b. Real estate taxes 20b. \$			¢.	0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0			\$	
20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0				0.00
200. Wainterlaince, repair, and uphoop expenses			-	0.00
20e. Homeowner's association or condominium dues 20e. \$		20d. 20e.		

Debtor	1	Frenny		Mariano	Case number (if known) 8	-18-76800	-ast	
		First Name Middle Name	Lest Name			•		_
21. O	ther. S	Specify:			21	. +\$	0.00	
22. C a	alculat	te your monthly expenses.		;				
22	2a. Add	d lines 4 through 21.		! !	22a .	· \$	5,604.31	
22	2b. Cop	py line 22 (monthly expenses for	or Debtor 2), if any,	from Official Form 10	06J-2 22b	\$	0.00	
22	2c. Add	d line 22a and 22b. The result is	s your monthly expo	enses.	22c.	\$	5,604.31	
23. Ca l	lculate	e your monthly net income.						
23a	ı. Co	ppy line 12 (your combined mon	thly income) from S	Schedule I.	23a	. \$	4,541.68	
23b	. Co	py your monthly expenses fron	n line 22c above.	1	23b	-\$	5,604.31	
23c		btract your monthly expenses fe result is your monthly net inco		ncome.	230	. \$	-1,062.63	
54 Do		expect an increase or decrease	in vaus avaas	, , , , , , , , , , , , , , , , , , ,	Man way file this farm?			
Foi	r exam	nple, do you expect to finish pay	ying for your car loa	n within the year or o	lo you expect your			
		e payment to increase or decrea	ase because of a m	odification to the terr	ns of your mortgage?			
	No. Yes.	Evaloin bore		1				
. –	163.	Explain here:					:	,
				!			;	
'								

					'
II in this information to identi	fy your case:				. !
Frenny First Name	. Middle Name	Mariano Lest Name			
btor 2 couse, if filing) First Name	Middle Name	Lest Name			
ited States Bankruptcy Court for th					
se number _8-18-76800-as					
known)				. 🗖 0	Check if this is
		:		а	mended filing
Off:					
Official Form 106		:			:
Declaration <i>i</i>	About an	Individual	Debtor's Sch	edules	12/15
If two married people are fili	ng together, both are	equally responsible for	supplying correct information.		:
,			ded schedules. Making a false		property, or
obtaining money or property	by fraud in connection	on with a bankruptcy c	ase can result in fines up to \$25		
ears, or both. 18 U.S.C. §§ 1	52, 1341, 1519, and 3	571.			
		:			
Sign Below					
Did you pay or agree to p	ay someone who is N	OT an attorney to help	you fill out bankruptcy forms?	Ý	
☑ No					
☐ Yes. Name of person			Attach Bankruptcy Petition Pre	eparer's Notice, Declaration,	and
		!	Signature (Official Form 119).		:
			·		
I for all an annual for a for a serious	I dealers that I have	read the summary and	schedules filed with this declar	ration and	
that they are true and co		read the summary and	schedules filed with this decial	auon and	
1 .					Ĺ
* Lh		×			
Signature of Debtor 1		Signature of D	ebtor 2		
•					ĺ
Date (0 25 2018)	_	Date MM / DD	/ YYYY	1	
1					
•		İ			
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		;			:

			:			
in this i	nformation to ident	tify your case:				
otor 1	Frenny		Mariano			;
otor 2	First Name	Middle Name	Last Ņame			
	First Name	Middle Name	Last Name			
		he: Eastern District of I	New York			
se number	8-18-76800-as	st				☐ Check if this i
	<u>:</u>	_ 	<u>i</u>			amended filing
المنما	Carra 107					i
	Form 107					
<u>atem</u>	ent of Fin	ancial Affai	rs for Indi	viduals Filing	for Bankruptc	<u> </u>
	your current marita	al status?	; ;			
⊘ 1	do d		i			
Marr						
						1
☐ Not r	married	ve you lived anywhere	e other than where	you live now?		1
□ Not r During t □ No	married he last 3 years, hav			e you live now?		
During to No Yes.	married he last 3 years, hav			ide where you live now.		Dates Debto
During to No Yes.	he last 3 years, hav		years. Do not iricle	Debtor 2:		lived there
During t	married he last 3 years, have List all of the places btor 1:	s you lived in the last 3	years. Do not include the property of the prop	Debtor 2:		11
During to No Yes.	he last 3 years, hav	s you lived in the last 3	years. Do not include the property of the prop	Debtor 2: Same as Debtor 1 O15		lived there Same as De
During to No Yes.	married he last 3 years, have List all of the places btor 1:	s you lived in the last 3	years. Do not include the property of the prop	Debtor 2: Same as Debtor 1 O15		lived there Same as De
During t No Yes.	the last 3 years, have List all of the places better 1:	s you lived in the last 3	years. Do not include the property of the prop	Debtor 2: Same as Debtor 1 O15		lived there Same as De
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During to No Yes.	the last 3 years, have last 3 years, have list all of the places better 1: 2709 Santa Moniumber Street	ca Bvrd	years. Do not include the property of the prop	Debtor 2: Same as Debtor 1 O15 Number Street	State ZIP Code	lived there Same as De
During to No Yes.	the last 3 years, have last 3 years, have list all of the places better 1: 2709 Santa Moniumber Street	ca Bvrd	years. Do not included there From 08/01/2 To 01/31/2	Debtor 2: Same as Debtor 1 O15 Number Street City	State ZIP Code	□ Same as De
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During t No Yes. De 2 No Ci Within t states a. No	the last 8 years, did and territories include	CA 90404 State ZIP Code	years. Do not included the property of the pro	Debtor 2: Same as Debtor 1 O15 O18 City Number Street Number Street City City Quivalent in a community provada, New Mexico, Puerto R	State ZIP Code	Ilived there Same as De From To Same as De From To C(Community prope

r1 Frenny	Mariano	Case nu	umber (if known) 8-18-76800	-asi
First Name Middle Name Last N	Name !			
				
Did you have any income from employmen Fill in the total amount of income you received				endar years?
If you are filing a joint case and you have inco	- 1			
□ No				:
Yes. Fill in the details.				:
	Debtor 1		Debtor 2	
	Sources of income, Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until	☑ Wages, commissions	s 84,846.09	☐ Wages, commissions,	!
the date you filed for bankruptcy:	bonuses, tips Operating a busines	-	bonuses, tips Operating a business	\$
			— Operating a business	
For last calendar year:	Wages, commissions bonuses, tips	s, 90,344.40	Wages, commissions, bonuses, tips	•
(January 1 to December 31, 2017	Operating a busines	<u> </u>	Operating a business	Ψ
,	Π		D	-
For the calendar year before that:	Wages, commissions bonuses, tips	s, \$ 119,722.00	Wages, commissions, bonuses, tips	•
. o. ale calculati year notice that	_			3
(January 1 to December 31, 2016 YYYY Did you receive any other income during the linclude income regardless of whether that income unemployment, and other public benefit paying gambling and lottery winnings. If you are filing	come is taxable. Example nents; pensions; rental in g a joint case and you ha	vious calendar years? es of other income are alir icome; interest; dividends; ive income that you receive	; money collected from law wed together, list it only onc	suits; royalties; and
(January 1 to December 31, 2016 YYYY Did you receive any other income during the linclude income regardless of whether that income unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from each No	his year or the two pre- come is taxable. Example nents; pensions; rental in g a joint case and you ha	vious calendar years? es of other income are alir icome; interest; dividends; ive income that you receive	mony; child support; Social ; money collected from law ved together, list it only onc	suits; royalties; and
(January 1 to December 31, 2016 YYYY Did you receive any other income during the linclude income regardless of whether that income unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from each No	his year or the two pre- come is taxable. Example nents; pensions; rental in g a joint case and you ha	vious calendar years? es of other income are alir icome; interest; dividends; ive income that you receive	mony; child support; Social ; money collected from law ved together, list it only onc	suits; royalties; and
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(January 1 to December 31, 2016 YYYY Did you receive any other income during the notice income regardless of whether that income public benefit paying pambling and lottery winnings. If you are filling it each source and the gross income from each source and t	his year or the two precome is taxable. Example nents; pensions; rental ing a joint case and you has each source separately.	vious calendar years? es of other income are alinicome; interest; dividends, ive income that you receive not include income that	mony; child support; Social i; money collected from law wed together, list it only once at you listed in line 4.	suits; royalties; and the under Debtor 1. Gross income from each source
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Case number (if known) 8-18-76800-ast Frenny Mariano Debtor 1 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Amount you still owe Was this payment for... Total amount paid payment **Toyota Motor Credit** 20,643.00 ■ Mortgage Creditor's Name ☑ Car 100 **Bridgeport Ave** Credit card Street Number Loan repayment ☐ Suppliers or vendors CT 06484 Shelton Other: City ZIP Code State 263,794.35 Bank of America ✓ Mortgage Creditor's Name ☐ Car PO Box 31785 Credit card Number Street Loan repayment ☐ Suppliers or vendors FL 33631 Tampa Other_ ZIP Code 19,980.10 Chase Bank Mortgage Creditor's Name ☐ Car PO Box 78420 ☐ Credit card Number Street Loan repayment Suppliers or vendors ΑZ 85062 Phoenix Other State ZIP Code

Frenny Mariano , 8-18-76800-ast Debtor 1 Case number (if know Last Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☑ No ☐ Yes. List all payments to an insider. **Total amount** Dates of Amount you still Reason for this payment payment paid Insider's Name Number Street City State ZIP Code Insider's Name Number Street ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. ☑ No lacksquare Yes. List all payments that benefited an insider. Dates of Amount you still **Total amount** Reason for this payment payment paid owe Include creditor's name Insider's Name Number Street City ZIP Code Insider's Name Number Street

Case 8-18-76800-ast

Doc 13

Filed 10/26/18 Entered 10/26/18 14:44:25

ZIP Code

First Name Middle Name	Last Name	Case number (if known) 8-18-7680	
Lingt Manne Mindring Manne	Last Name		;
<u> </u>	! 		,
t 4: Identify Legal Actions, Rep	ossessions, and Foreclosu	res	•
Nithin 1 year before you filed for bank	ruptcy, were you a party in any	lawsuit, court action, or administrative pro	ceeding?
	njury cases, small claims actions,	divorces, collection suits, paternity actions, su	pport or custody modification
and contract disputes.			,
v i №	1		;
Yes. Fill in the details.			
	Nature of the case	Court or agency	Status of the case
			a manage of the same of the sa
Case title	<u>-</u>	Court Name	——— Dending
			On appeal
		Number Street	Concluded
	:	1.0	
Case number	_	City State ZIP Code	
	1		
			—— Pending
Case title	_ ;	Court Name	
	_		On appeal
		Number Street	Concluded
Case number			
	1	City State 7ID Code	
Check all that apply and fill in the details I		City State ZIP Code	ched, seized, or levied?
Check all that apply and fill in the details leed. Mo. Go to line 11.			ched, seized, or levied?
Check all that apply and fill in the details of No. Go to line 11.	below.	ty repossessed, foreclosed, garnished, atta	
Check all that apply and fill in the details of No. Go to line 11.		ty repossessed, foreclosed, garnished, atta	ched, seized, or levied?
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Check all that apply and fill in the details of No. Go to line 11.	below.	ty repossessed, foreclosed, garnished, atta	
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Frenny Mariano Case number (if known) 8-18-76800-ast Debtor 1 Middle Name Last Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **☑** No Yes. Fill in the details. Describe the action the creditor took Date action was taken Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX-_ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ No ☐ Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? lacksquare Yes. Fill in the details for each gift. Dates you gave Gifts with a total value of more than \$600 Describe the gifts per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you Describe the gifts Dates you gave Value Gifts with a total value of more than \$600 the gifts per person Person to Whom You Gave the Gift City State ZIP Code Person's relationship to you _ Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6 Official Form 107

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Frenny First Name Middle Name	Mariano	Case number (if known) 8	-18-76800-ast	
First Name Middle Name	Lest Name			
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nin 2 years before you filed for	bankruptcy, did you give any gifts or	contributions with a total value	! e of more than \$600 to anv	chari
No			· .	
Yes. Fill in the details for each gi	ft or contribution.		i i	
Gifts or contributions to charities	Describe what you contributed		Date you Value	
that total more than \$600			contributed	; .
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Frenny Mariano 8-18-76800-ast Debtor 1 Case number (if kr Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☑ No ☐ Yes. Fill in the details. Date payment or Description and value of any property transferred Amount of payment transfer was made Person Who Was Paid Number Street ZIP Code State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **☑** No Yes. Fill in the details. Describe any property or payments received Date transfer Description and value of property transferred or debts paid in exchange was made Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer Number Street State ZIP Code Person's relationship to you Official Form 107

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1. Do vo	ou now have, or d	lid vou h	nave within 1	1 year before you fi	- led for bankru	ptcy, any safe deposit	box or other deposit	ory for	:
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Mariano Frenny 8-18-76800-ast Debtor 1 Case number (## Middle Name 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ☑ No Yes. Fill in the details. Who else has or had access to it? Describe the contents. Do you still have it? ☐ No Name of Storage Facility Name ☐ Yes Number Street Number Street City State ZIP Code City ZIP Code Part 9: **Identify Property You Hold or Control for Someone Else** 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ☑ No Yes. Fill in the details. Describe the property Value Where is the property? Owner's Name Number Street Number Street ZIP Code City City ZIP Code State **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. # Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Environmental law, if you know it Date of notice Governmental unit Governmental unit Name of site Number Street Number Street City ZIP Code ZIP Code City State

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Case number (if known) 8-18-76800-ast Frenny Mariano Debtor 1 Middle Name 25. Have you notified any governmental unit of any release of hazardous material? ☐ Yes. Fill in the details. Date of notice Governmental unit Environmental law, if you know it Name of site Number Street Number Street State ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. Status of the Court or agency Case title Pending Court Name On appeal Concluded Number Street Case number City Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN Business Name Number Street Name of accountant or bookkeeper Dates business existed State ZIP Code Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper From State ZIP Code City

Filed 10/26/18 Entered 10/26/18 14:44:25 Case 8-18-76800-ast Doc 13 Mariano Frenny Case number (if known) 8-18-76800-ast Middle Name **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed To _ ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☑ No Yes. Fill in the details below. Name MM / DD / YYYY Number Street City State ZIP Code Sign Below Part 12: I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date 10/25/13 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? **☑** No

> Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☑ No

☐ Yes. Name of person_

Debtor 1

Case 8-18-76800-ast Filed 10/26/18 Entered 10/26/18 14:44:25 Doc 13 Fill in this information to identify your case: Debtor 1 Frenny Debtor 2 (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: Eastern District of New York ☐ Check if this is an Case number 8-18-76800-ast amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form. If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 1: **List Your Creditors Who Have Secured Claims** 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. What do you intend to do with the property that as exempt on Schedule C? secures a debt? Creditor's ☐ No Surrender the property. Bank of America name: Retain the property and redeem it. Description of 149 Haig Rd Primary Residence Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Con-time & making payments Creditor's Surrender the property. ☐ No Chase Bank name: **▼**Yes Retain the property and redeem it. Description of 149 Haig Rd Primary Residence Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: making payments Creditor's ☐ No Surrender the property. Toyota Finance name: **☑** Yes Retain the property and redeem it. Description of Toyota highlander 2013 Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's ☐ No Surrender the property. name: Retain the property and redeem it. ☐ Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]:

Frenny Mariano Case number (If known) 8-18-76800-ast Debtor 1 Part 2: List Your Unexpired Personal Property Lease's For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 1 Signature of Debtor 2 MM / DD / YYYY

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